



PART B - FEE(S) TRANSMITTAL

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10/17/2006 MBIZUNE2 00000049 10014741

01 FC:2501 700.00 OP
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Nicole Solomon	(Depositor's name)
<i>Nicole Solomon</i>	(Signature)
October 12, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/014,741	12/10/2001	David J. Miller	01935-23804.CIP	7020

TITLE OF INVENTION:

METHOD FOR INCREASING THE BATTERY LIFE OF AN ALTERNATING CURRENT IONTOPHORESIS DEVICE USING A BARRIER-MODIFYING AGENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	10/12/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
WILLIAMS, CATHERINE SERKE	3763	604-020000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Aciont, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Salt Lake City, UT

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 10

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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-0100 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Todd B. Alder

Date October 12, 2006

Typed or printed name Todd B. Alder

Registration No. 54,598

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